UN

UNITED NATIONS

E

Economic and Social Council

Distr.
GENERAL

E/CN.7/1996/7
20 December 1995

ORIGINAL: ENGLISH

COMMISSION ON NARCOTIC DRUGS
Thirty-ninth session
Vienna, 16-25 April 1996
Item 4 of the provisional agenda*

PRINCIPLES AND PRACTICE OF PRIMARY AND SECONDARY PREVENTION IN DEMAND REDUCTION PROGRAMMES

Regional cooperation in demand reduction

Report of the Secretariat

Summary

The need to establish a regional mechanism for the regular exchange of information, experiences, training programmes and new ideas on demand reduction was recognized by the Commission on Narcotic Drugs at its thirty-sixth session. In response, the United Nations International Drug Control Programme organized subregional expert forums on demand reduction and international private sector conferences on drugs in the workplace and the community. Participants examined the nature of drug abuse and its patterns and trends in their countries and described and compared the programmes that had been or could be undertaken to reduce the illicit demand for drugs. The forums also explored ways to facilitate the development of professional networks at the national and subregional levels. It was concluded that there was a need to develop regional and interregional networks and to formulate national demand reduction plans, taking into account the specific socio-cultural situations. All the forums concluded that there was a need to continue the momentum that had been generated by holding further meetings on a regular basis. The involvement of the private sector in the mobilization of human and financial resources to prevent drug abuse in the workplace and in the community was the subject of two meetings. It was emphasized that there was a need for closer interaction between the business sector and various other sectors of society to promote demand reduction activities. Although the discussions during the private sector conferences reflected a wide range of views representing many different cultural perspectives on the issue of drug abuse in the workplace, a healthy and safe workplace still remained the essential goal. It was concluded that regional cooperation was a fundamental requirement for confronting the problem of drug abuse and that the business sector needed to be in partnership with the community if it was to be successful.

*E/CN.7/1996/1.

V.96-60465T

CONTENTS

	Paragraphs	*Page*
INTRODUCTION	1-3	3
I. EXPERT FORUMS ON DEMAND REDUCTION	4-26	3
A. Objectives	4-8	3
B. Proceedings	9-12	4
C. Outcome	13-21	4
D. Future directions	22-26	5
II. INTERNATIONAL PRIVATE SECTOR CONFERENCES ON DRUGS IN THE WORKPLACE AND THE COMMUNITY	27-44	6
A. Objectives	27-28	6
B. Proceedings	29-32	7
C. Outcome	33-39	7
D. Future directions	40-44	8
III. CONCLUSION	45-49	9
IV. GUIDANCE REQUESTED FROM THE COMMISSION ON NARCOTIC DRUGS	50-51	10

INTRODUCTION

1. The establishment of a regional and international system for the regular exchange of information, experiences, training programmes and new ideas on demand reduction programmes and policies was encouraged by the Economic and Social Council in its resolution 1993/35, adopted on the recommendation of the Commission on Narcotic Drugs at its thirty-sixth session. At the same session, during the discussion on the draft provisional agenda for its thirty-seventh session and future work, the Commission noted that the results of regional conferences on demand reduction could be examined.

2. The Commission on Narcotic Drugs at its thirty-eighth session, in considering the draft provisional agenda for its thirty-ninth session, decided that the item on demand reduction should specifically target primary and secondary prevention of illicit demand, as well as the regional expert forums on demand reduction.

3. In response to the wishes of the Commission, the United Nations International Drug Control Programme (UNDCP) has so far organized five subregional expert forums on demand reduction and two international private sector conferences on drugs in the workplace and the community, the results of which are described in the present report.

I. EXPERT FORUMS ON DEMAND REDUCTION

A. Objectives

4. The first subregional expert forum on demand reduction, for eastern and southern Africa, was held at Nairobi from 1 to 5 November 1993. The second forum, for Latin America, took place at São Paulo, Brazil, from 10 to 13 May 1994. That was followed by a forum for the Caribbean, which was held at Nassau from 4 to 7 October 1994. The fourth forum, for central and western Africa, was held at Yaoundé from 6 to 10 February 1995. The fifth forum, for south and south-west Asia, was held at New Delhi from 6 to 10 March 1995. Numerous Governments, United Nations entities and other organizations participated in the forums.

5. The aims of all the forums were broadly similar, but varied slightly from subregion to subregion according to the nature of the drug abuse problems experienced, the extent of existing demand reduction programmes and the resources available in the subregion.

6. The first aim of the forums was to examine the differences and similarities in the nature of drug abuse and its extent, patterns and trends in the participating countries, in order to provide background for discussion and to enable UNDCP to update its knowledge of the drug abuse situation in each subregion. The second aim was to identify the range and type of existing demand reduction programmes in each country and the extent of human, financial and physical resources currently available to carry out those programmes. A third aim was to identify priority areas for drug demand reduction activities based on an assessment of the situation and the resources available. Those discussions gave UNDCP indications of the capacity to implement demand reduction programmes in individual countries and in the subregion as a whole.

7. The exchange of information and experiences related to demand reduction programmes was expected to result in a transfer of knowledge and ideas, so that participants could learn from each other's difficulties, failures and successes. In order to sustain the exchange of ideas the forums were also expected to facilitate the development of professional networks among the participants, at the country and subregional levels, by sharing information on the range of demand reduction activities, policies and means of implementation.

8. One forum, for a subregion that had already developed extensive demand reduction programmes, was able to incorporate the additional aim of developing a subregional strategic plan. How programmes could be designed and implemented, and by which institutions, including how difficulties could be overcome, was to be explored. One goal of the forum was drawing up action plans to produce more effective demand reduction programmes and strategies in each country, as well as at the subregional and regional levels.

B. Proceedings

9. Each of the forums examined not only demand reduction, but also recent developments in the field, together with the drug situation in the subregion in question.

10. Working groups were organized on the following issues: similarities and differences in drug abuse patterns and trends in countries and the reasons; the specific causes and consequences of drug abuse; existing demand reduction programmes; how far those programmes matched the drug abuse situation; and how needs were assessed and how that assessment could be improved. There were also working groups on issues of concern in each subregion, such as primary prevention and drug education in formal and non-formal settings; community activities; outreach work and street children; mass media and public awareness campaigns; primary prevention in the workplace and other workplace programmes; treatment; rehabilitation and social reintegration; implementation of national strategies; gender and drug abuse; and needs assessment for programme design, monitoring and evaluation.

11. The working groups also placed emphasis on coordination and cooperation at the national and subregional levels. They considered problems such as how to formulate, develop and implement national demand reduction strategies, how to mobilize resources needed for their implementation and how to link and coordinate the parties involved within countries and between countries.

12. A report was adopted by each forum. Each report provided an overview of the drug situation and of the demand reduction programmes in the region, as well as structures, resources and services that could be used or that needed to be developed for demand reduction activities. A clearer picture emerged of the nature of the problems facing many countries, as well as an overview of the subregional situation.

C. Outcome

13. In all the forums it was agreed that national demand reduction plans should be based upon a clear assessment and analysis of the drug abuse situation and the knowledge of the causes and consequences of drug abuse. It was agreed that given the complexity of demand reduction activities, every effort should be made to ensure that all relevant professions, disciplines and ministries were involved in this task. As a result of the discussions many participants became more aware of sources of information that were available within regions and subregions.

14. Before formulating national demand reduction plans, there was a need to establish systematic and standardized data collection systems in order to be more fully aware of the nature and extent of the drug abuse problems and to keep abreast of their changing patterns. The need for intersectoral coordination in the collection and exchange of data and in the development of programmes was emphasized. Where there were similar cultural, social and economic patterns, the exchange of information and experiences helped to reduce some of the difficulties inherent in the transference of demand reduction programmes from one culture to another.

15. In many forums, the view was expressed that demand reduction strategies needed to be coordinated and to form part of a wider strategy that would also incorporate law enforcement strategies, at the national and subregional levels. Such integration was important not only at the national level, but also at the local level. Coordination between the law enforcement and treatment services could facilitate the process whereby, for

example, drug abusers would enter a treatment programme as a result of legal or administrative pressure. In one forum a wide-ranging action plan for the subregion was elaborated; the action plan was intended to serve as a basis for the development of demand reduction programmes.

16. Attention was drawn to the consequences of rising drug abuse, which participants felt resulted in not only dependency and deterioration of health among individuals, but also contributed to family breakdown, increased homelessness among children, prostitution, high unemployment, low productivity, increased crime rates, increased road and job-related accident rates and socio-political instability.

17. In several forums it was agreed that treatment services were not only inadequate but also often inappropriate. The reasons cited were low priority given to drug abuse by Governments, scarcity of funds, lack of expertise and an imbalance between supply and demand reduction efforts. Therefore, more emphasis must be given to providing adequate treatment facilities. It was noted that treatment should be designed to be flexible and patient-oriented. The importance of providing easy and immediate access to services that matched patients' needs was stressed.

18. In two forums it was noted that human immunodeficiency virus (HIV) infection was spreading quickly among injecting drug users in developing countries. That development had emerged in parts of Asia and South America within a relatively short period of time. It was felt that it was imperative for a quick response to be made to the rapidly deteriorating situation. In many of the forums the view was expressed that other regions needed to increase the awareness of government leaders and of society at large with regard to the matter, so that they would be prepared to respond to changes in the patterns of drug abuse and to prevent HIV infection from reaching epidemic levels among drug abusers.

19. In several forums it was concluded that the gender dimension should be taken into consideration in all drug demand reduction activities, including activities related to policy formulation, treatment services management, preventive education and social reintegration of rehabilitated drug abusers. The view was expressed that society-assigned gender roles contributed to drug abuse behaviour and that, therefore, to effectively deal with the increasing drug abuse, intervention through the gender relationship was one of the keys to reducing the illicit demand for drugs.

20. It was also noted in the forums that drug prevention campaigns that were well-coordinated and carefully tailored for a specific population tended to produce slow but positive results. It was frequently noted that mass media campaigns with negative messages, emphasizing the adverse effects of drug abuse and inculcating fear, were not effective, particularly if the messages were not entirely accurate. Therefore mass media campaigns should be positive in focus. Such campaigns should be pursued above all in regions where there was little awareness of the nature of drug abuse or where the availability of services was not widely known.

21. In many forums it was concluded that the involvement of the private sector in mobilizing human and financial resources to prevent drug abuse in the workplace should be actively pursued. Projects should be designed by the municipality and the community and should incorporate a high degree of decentralization. Law enforcement agencies should be involved in the demand reduction strategies.

D. Future directions

22. The forums also looked at specific national programmes and activities and made recommendations for both specific programmes and future meetings. All the forums stressed the need to develop national plans for reducing the illicit demand for drugs, plans adapted to the specific socio-cultural situation within a country or parts of the country. The plans should integrate activities in all sectors of demand reduction, whether in the mass media, in-school and out-of-school education, outreach work, treatment and rehabilitation. Priority areas of action should be selected for immediate programme formulation and implementation within a set time-frame. National plans could form the basis for the establishment of subregional networks to facilitate

the utilization of existing data in devising systematic policies and the sharing of expertise within subregions. The view was expressed in many forums that gender and the transmission of HIV were issues that must be taken into account when formulating policy.

23. One conclusion reached in all the forums was that more training needed to be given to health professionals since they could play an important role in the early identification of drug abuse and in the provision of counselling. The development of a national demand reduction programme required the mobilization of human and material resources. Professionals needed to be trained not only in the medical and social aspects of demand reduction, but also in programme design, project implementation and administration. Relevant ministries, non-governmental organizations and other agencies dealing with demand reduction should also be mobilized. The training would reduce the costs associated with treatment. Specific policies, strategies and programmes were needed for special groups at risk, such as street children, women and young people. The feasibility and effectiveness of low-cost treatment programmes should be explored and greater use should be made of indigenous treatment approaches. It was felt that there was a need to pay more attention in the future to the rehabilitation of drug abusers in order to break the cycle of abuse, treatment and relapse.

24. In developing future demand reduction programmes, systematic programme monitoring and evaluation should continue to be built into all programme planning and should constitute an essential element of the national plans. Programme evaluation was regarded as an essential element to be incorporated into all future programmes, for it provided a basis for the targeting and development of future activities, as well as being a feedback mechanism. It could also be used as a tool to secure political support and resources.

25. In one forum it was suggested that an action plan should be established for each subregion. A strong feeling was expressed that participation in future forums should be restricted to persons who were working directly in the field of demand reduction and not in the field of supply reduction or the suppression of illicit traffic. There was also a keen desire to establish a regular dialogue with law enforcement specialists in each of the subregions. It was therefore suggested that future forums on demand reduction should be held at the same time and place as the regional meetings of heads of national drug law enforcement agencies (HONLEA) and that some joint meetings should be arranged to discuss issues of common concern and interest.

26. It was concluded that the forums on demand reduction had been extremely useful. All the forums expressed the desire for the meetings to be held on a regular basis, as was done with the regional HONLEA meetings, in order to enable the momentum generated at the forums on demand reduction to be carried forward. Whether the forums should alternate with the regional HONLEA meetings or should be held in parallel was also discussed, but the need for the forums to continue in some form was held to be paramount.

II. INTERNATIONAL PRIVATE SECTOR CONFERENCES ON DRUGS IN THE WORKPLACE AND THE COMMUNITY

A. Objectives

27. A series of regional and interregional conferences has been planned in order to mobilize the private sector to participate more actively in the prevention of drug abuse in the workplace and in the community. The first International Private Sector Conference on Drugs in the Workplace and the Community, which took place at Seville, Spain, from 13 to 15 October 1993 and which was organized jointly by the Plan Nacional sobre Drogas of Spain and UNDCP, dealt with problems common to companies in Europe and North America. The second International Private Sector Conference on Drugs in the Workplace and the Community, which was held at Pôrto Alegre, Brazil, from 24 to 26 April 1995, was organized jointly by UNDCP, the International Labour Organization and the Social Service for Industry (SESI) of the Federation of Industries of the State of Rio Grande do Sul, focused upon companies in Latin America and the Caribbean.

The first and second conferences were attended by representatives of Governments, United Nations entities and other organizations, in addition to universities and community organizations, corporations and trade unions. A third conference is planned for east Asia in 1997.

28. The first aim of the first and second conferences was to promote the idea that drug demand reduction and the prevention of drug abuse in the workplace should be an integral part of broader policies and programmes against drug abuse undertaken by the responsible authorities at the local, national and international levels. Thus, private sector activity in the field of reduction of illicit demand for drugs should be integrated into national strategies and should dovetail with UNDCP efforts to promote regional and subregional cooperation agreements. The second aim was to promote close interaction in the area of drug abuse prevention between representatives of the business sector and other important sectors of society, such as the trade unions, non-governmental organizations and health professions, as well as the specialized agencies and other entities of the United Nations system. The conferences were also aimed at promoting the sharing of concrete drug abuse prevention experiences of private sector organizations, trade unions, non-governmental organizations and other parts of the community, as well as the results of some joint programmes involving all or some of those partners. Thus, the conferences were to serve as a stimulus for closer cooperation between the private sector and the community.

B. Proceedings

29. The two conferences covered largely the same issues. The first, however, concentrated more on the nature of the drug problem and the second focused on the responses to it. Papers were presented by experts on various aspects of the problem. Working groups considered relevant issues and then reported back to the plenary.

30. Presentations were made analysing trends in, and corporate world responses to, the drug abuse problem in the workplace. The presentations were followed by an examination of a number of ongoing programmes involving collaboration between businesses and communities. The corporate perspective emphasized preventive activities. It placed particular emphasis on physical, psychological and social health, targeting the workers and their families and organizing self-help groups, which promoted the changing of attitudes in order to discontinue use of dependence-producing substances. The trade union perspective emphasized the need to develop further government policies in the area of substance abuse.

31. There was also an analysis of the economic and social costs of drug abuse, the impact of substance abuse on the corporate world, and prevention strategies in the workplace and the community. The family was seen as the key social institution linking both the workplace and the community. The role of the family in the prevention of drug abuse was emphasized, in particular the capacity of the family to promote healthy lifestyles and behaviour by providing relevant information supporting preventive education.

32. At the first International Private Sector Conference, guidelines were set to assist in the design and implementation of programmes to deal with substance abuse in diverse workplace and community settings. Similar model programmes for drug abuse prevention were suggested at the second International Private Sector Conference. The programmes employed a holistic approach to dealing with problems involving employee health and well-being, in the context of which misuse of alcohol and drugs could also be dealt with.

C. Outcome

33. There was agreement that absenteeism, accidents, conflicts and drug dealing were all possible indicators of drug-related problems in the workplace. The issue of drugs in the workplace was seen as a complex one that should be examined from many perspectives. The fundamental requirement of any workplace policy in relation to drug abuse was that it should be backed by management. A major focus of the discussions was the issue of building business and community partnerships for the prevention of substance abuse.

34. At both conferences it was stated that the primary concern of many companies was alcohol-related problems in the workplace and that drug-related problems was a secondary issue. Many companies, however, were increasingly becoming concerned about problems related to the abuse of drugs and anticipated an increase in such problems.

35. There were lively exchanges of ideas and descriptions of different practices that broadened the understanding of the range of approaches used and the various problems existing in different industries and countries. It was noted that there were social and cultural differences in approaches to dealing with alcohol-related problems. Practices varied in organizations, even within countries, often depending on the size of the organization and the area of work. Such problems had traditionally required special attention in high-risk industries and safety-sensitive positions, such as the energy, transport and chemical industries. In less sensitive industries the range of corporate policies varied from zero tolerance of drugs to a more problem-oriented perspective, which was concerned with prevention, treatment and rehabilitation.

36. The issue of drug testing in the workplace was widely discussed but no agreement was reached on it. Nevertheless the participants valued the opportunity to exchange ideas and to explore in greater depth the problems that the issue of drug testing raised. Participants from some organizations specifically rejected drug testing, saying that a tripartite policy between the state, the employer and the employee, based only on counselling, treatment and rehabilitation, was their preferred option; others, however, felt strongly that it should be compulsory.

37. It was emphasized that, usually, policies could not be exported from one country to be adopted in another. It was noted, however, that some multinational companies were able to do just that, particularly in the oil and shipping industries, where a drug-testing programme might be required to be in place prior to the signing of a contract. It was felt that there was a need for each company to identify the nature of its own problems before a solution could be reached.

38. There was general consensus that there was a need for objective and reliable studies on drug abuse in the workplace. Data on alcohol abuse were usually easier to obtain than data on other drug abuse patterns. Nevertheless, from some general epidemiological studies it was possible to obtain information on the occupational status of drug and alcohol abusers.

39. The experience of the workforce and their representatives in dealing with problems of substance abuse was vital to the development of substance abuse programmes in the workplace and the community.

D. Future directions

40. Participants at both conferences agreed that successful substance abuse policies and programmes should be conceived and implemented in an equitable manner for management and labour. Their positive social impact had also demonstrated that they had economic benefits for the employer. Safety-sensitive work areas were seen as possibly presenting conditions requiring additional procedural elements such as testing and screening.

41. In future, drug testing should be seen as a diagnostic tool and deterrent that might be used effectively as part of a comprehensive demand reduction programme. A continuum of diagnostic tools, including peer review, counsellor assessment and drug testing, should be applied within each country taking into account national practices.

42. All participants agreed on two principles to be applied to all employees of participating enterprises and not just to specific groups of workers. The first was that the nature and structure of work sectors should be taken into consideration in forming plans for the implementation of general policy. The second was that all

psychoactive substances (illicit drugs, prescribed and non-prescribed medications and alcohol) should be included within general policy to prevent drug abuse problems in the workplace.

43. It was noted that, as a general rule, international, national and regional organizations advocating the adoption of workplace programmes should incorporate such policies into the management of their own human resources. Finally, it was considered important that general models for the promotion of workplace programmes to prevent drug and alcohol problems should be sufficiently flexible or adaptable to the great variety of cultural and organizational structures to which they applied.

44. On the basis of the work of the conferences, UNDCP intends to compile a compendium of existing workplace programmes and schemes for collaboration between businesses and communities, ensuring its wide dissemination for potential adaptation and implementation by enterprises and communities around the world.

III. CONCLUSION

45. The forums on demand reduction provided an overview of the drug situation in the several subregions, of existing demand reduction programmes and of resources that would be needed to carry out those programmes. Emphasis was placed on the lack of reliable data on the nature and extent of drug abuse and the lack of comprehensive data on the various programmes that had been established to deal with drug abuse. The exchange of information and the sharing of experiences between countries were fundamental to the establishment of coordinated subregional collaboration.

46. The importance of monitoring and evaluation was underlined. There were strong views expressed on the need to improve training for all categories of staff. It was felt that more attention should be given to rehabilitation and that treatment services must be designed for, and made more accessible to, persons in need of such services. The increasing social problems in all regions made the targeting of special groups at risk, such as street children, women, HIV-infected persons and youth in general, one of the most important issues of any demand reduction programme.

47. The success of the forums was demonstrated by the enthusiasm they had generated and by the strong desire on the part of the participants to see them continue. It was recognized that the exchange of information, ideas and experiences was particularly important to the development of demand reduction programmes. The wish was often expressed for the forums to be given equal importance with the regional HONLEA meetings, thus reflecting a balanced approach to both demand and supply reduction.

48. The international private sector conferences, which explored the issues of health and safety in the workplace, concluded that substance abuse programmes should be flexible and sensitive to cultural diversity and to different organizational structures. Both conferences agreed that successful substance abuse programmes had a positive impact on health and safety in the workplace and the community. Making community involvement an integral component of substance abuse programmes in the workplace would maximize the effectiveness of such programmes.

49. Coordinated education, training and educational services should be the joint responsibility of employers and the community. Early implementation of prevention campaigns was a priority in dealing with substance abuse problems. It was felt that policy should promote health and safety in the workplace for the benefit of the workers, the employers and the community. The need to consider public health while maintaining the privacy and confidentiality of information regarding employees was underlined.

IV. GUIDANCE REQUESTED FROM THE COMMISSION ON NARCOTIC DRUGS

50. Following its discussion of agenda item 4, the Commission might wish to indicate to UNDCP how to proceed with the forums on demand reduction, which, in 1996, will complete the cycle of meeting in each subregion. Options include:

(a) To continue the forums on demand reduction as currently conceived (subregional meetings; status as expert group meetings; three-year cycle, holding two expert forums per year; annual cost of approximately 700,000 United States dollars; and cost covered under the Fund of the United Nations Drug Control Programme);

(b) To request inclusion of the forums on demand reduction under the regular budget of the United Nations:

(i) As expert group meetings at the subregional level;

(ii) As subsidiary bodies of the Commission on Narcotic Drugs at the regional level, based on the formula used for the regional HONLEA meetings;

(c) In case the forums on demand reduction are established as subsidiary bodies of the Commission on Narcotic Drugs:

(i) To hold annual forums on demand reduction parallel to the HONLEA meetings in each region;

(ii) To hold biennial meetings and alternate annually between HONLEA meetings and demand reduction forum meetings in each region.

51. The Commission might also wish to determine the basis upon which Governments should be invited to identify participants.